

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	10-01-01
FORMALITY REVIEW	TH	1118	10-18-01
RESPONSE FORMALITY REVIEW	Gay	817	10-28-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	2/4/03
2	5/2/03
3	11/26/03
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10	✓
11	✓
12	✓
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16	✓
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18	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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